

**2005 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Jan 10, 2005 08:00 AM
Secretary of State

DOCUMENT # P01000098726

1. Entity Name
C & J USED AUTO PARTS AND U PULL IT, INC.



Principal Place of Business

5655 BUCK WARD RD
BAKER, FL 32531

Mailing Address

5655 BUCK WARD RD
BAKER, FL 32531

DO NOT WRITE IN THIS SPACE



01062005 No Chg-P CR2E034 (10/03)

4. FEI Number

59-3753142

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

CAHILL, CLARENCE J SR.
5655 GRIFFITH CEMETARY RD.
BAKER, FL 32531

**DO NOT WRITE
IN THIS SPACE**

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

**FILE NOW!!! FEE IS \$150.00
After May 1, 2005 Fee will be \$550.00**

9. Election Campaign Financing
Trust Fund Contribution ☐

\$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE	P
NAME	CAHILL, URSULA H
STREET ADDRESS	5655 BUCK WARD ROAD
CITY - ST - ZIP	BAKER, FL 32531
TITLE	VP
NAME	CAHILL, CHARLES C
STREET ADDRESS	8509 WESTOVER COURT
CITY - ST - ZIP	SPRINGFIELD, VA 22152
TITLE	S
NAME	CAHILL, URSULA H
STREET ADDRESS	5655 BUCK WARD ROAD
CITY - ST - ZIP	BAKER, FL 32531
TITLE	T
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STREET ADDRESS	5655 BUCK WARD ROAD
CITY - ST - ZIP	BAKER, FL 32531
TITLE	
NAME	
STREET ADDRESS	
CITY - ST - ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY - ST - ZIP	

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01/10/05-80042-003 150.00

**DO NOT WRITE
IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(f), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my signature shall have the same legal effect as if made under oath, that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes, and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

Ursula Cahill

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

1-6-05